

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	JB		11-24-01
O.I.P.E. CLASSIFIER		12	12/14
FORMALITY REVIEW	TM	TC864	12/6/01
RESPONSE FORMALITY REVIEW	TM	906	2/06/02

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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58-859  
12/6/02  
850  
02-06-02

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